

Record of Shadow DCS Participation 2014

Edison Course Code CHDE3003

Instructions:

- 1) Register in Edison for Shadow DCS for your region. See your training coordinator if you need assistance.
- 2) After your shadow experience, fill this form out by completely shading the bubble next to your responses.
- 3) Have your supervisor sign the form.
- 4) Turn the form into your Training Coordinator to receive credit. Incomplete forms will not be accepted.

Name: _____

Edison ID (*not your EI number*): _____

Supervisor Name: _____

Supervisor Signature: _____

Begin Time: _____

End Time: _____

| Date of Shadow Experience | |
|---------------------------|-------------|
| Day | Month |
| ① | ① January |
| ① | ② February |
| ② | ③ March |
| ③ | ④ April |
| | ⑤ May |
| | ⑥ June |
| | ⑦ July |
| | ⑧ August |
| | ⑨ September |
| | ⑩ October |
| | November |
| | December |

| Your Region | |
|-----------------------|------------------|
| <input type="radio"/> | Central Office |
| <input type="radio"/> | Davidson |
| <input type="radio"/> | East |
| <input type="radio"/> | Knox |
| <input type="radio"/> | Mid-Cumberland |
| <input type="radio"/> | Northeast |
| <input type="radio"/> | Northwest |
| <input type="radio"/> | Shelby |
| <input type="radio"/> | Smoky |
| <input type="radio"/> | South Central |
| <input type="radio"/> | Southwest |
| <input type="radio"/> | Tennessee Valley |
| <input type="radio"/> | Upper Cumberland |

| | Strongly Disagree | Disagree | Neutral | Agree | Strongly Agree |
|--|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
| I found this to be a valuable experience. | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| I learned more about the work we do with children and families. | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| As a result of this experience I have a better understanding of how my job supports our DCS mission. | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |

TURN OVER FOR HOST INFORMATION

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Shadow Experience Host: Please select ONE

Office Of Safety (CPS Investigation)

- ☐ Davidson
- ☐ East
- ☐ Knox/Smoky Mountain
- ☐ Mid-Cumberland
- ☐ Northeast
- ☐ Northwest/Southwest
- ☐ Shelby
- ☐ South Central
- ☐ Tennessee Valley
- ☐ Upper Cumberland

Community Providers

- ☐ Centerstone - Davidson
- ☐ Centerstone - Jackson
- ☐ Centerstone - South Central
- ☐ Chambliss Center
- ☐ Child Help
- ☐ G4S
- ☐ Holston United Methodist Home
- ☐ King's Daughter's School
- ☐ Monroe Harding -Foster Care
- ☐ Monroe Harding -Cooperative Living
- ☐ Monroe Harding- Independent Living
- ☐ Monroe Harding - Youth Connections Resource Center
- ☐ Omni Visions in Middle Tennessee
- ☐ Youth Villages
- ☐ Other: _____

Host Region (Exclude CPSI experiences)

- | | |
|--|-----------------------|
| <input type="radio"/> Davidson | <input type="radio"/> |
| <input type="radio"/> East | <input type="radio"/> |
| <input type="radio"/> Knox | <input type="radio"/> |
| <input type="radio"/> Mid-Cumberland | <input type="radio"/> |
| <input type="radio"/> Northeast | <input type="radio"/> |
| <input type="radio"/> Northwest | <input type="radio"/> |
| <input type="radio"/> Shelby | <input type="radio"/> |
| <input type="radio"/> Smoky | <input type="radio"/> |
| <input type="radio"/> South Central | <input type="radio"/> |
| <input type="radio"/> Southwest | <input type="radio"/> |
| <input type="radio"/> Tennessee Valley | <input type="radio"/> |
| <input type="radio"/> Upper Cumberland | <input type="radio"/> |

Youth Development Center

- ☐ Mountain View
- ☐ Wilder
- ☐ Woodland Hills

Is there any thing you would like to share about your experience?

Other comments: